

## TAA Release of Information Agreement

Participant Information			
Participant:		SID#:	
Address:	City, ST:	Zip:	
<p><b>Participant's Awareness Statement:</b></p> <p>My signature certifies my intent to enroll in the Training Institution below. I do hereby request and authorize the Instructor, Counselor, Financial Aid Advisor, and training institution to provide any information regarding my attendance, performance, federal aid awards/grants, Credentials, and Employment/ Placement Data to TDLWD. This form and its contents have been discussed with me and I understand the information to be obtained is for the purpose of establishing and maintaining my eligibility for the TAA Program.</p>			
<p><b>TAA Participant Signature:</b> _____ <b>Date:</b> _____</p>			
<p><b>TAA-AJC Representative Signature:</b> _____ <b>Date:</b> _____</p>			

Vendor Information	
Name:	
Address:	
Training Program:	
Length of Training:	
<b>Date Classes Begin:</b>	
<b>Date Classes End:</b>	

*The Trade Adjustment Assistance Program is a federally funded program through the US Dept. of Labor, that provides adversely affected workers with opportunities to obtain the skills, credentials, resources, and support necessary to rebuild skills for future employment. TDLWD acts as an agent for USDOL and as such assist the worker throughout the training process. Therefore, as a condition of acceptance of TAA funds for training, the Participant agrees to provide and/or allow the Training Institution to provide performance, credential, and placement/employment data to TN Department of Labor Workforce and Development upon request.*